

FOOD  
HANDLERS

Commonwealth of the Northern Mariana Islands  
Department of Health  
Division of Public Health  
Bureau of Environmental Health

**CERTIFICATE OF COMPLETION FOR  
WORKSHOP PARTICIPANTS**

This is to certify that: Reggie's Gaudin First Last Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on: 2/21/04 Mo Day Yr as part of the Food Handler Certification  
requirements.

Certified by: Wally Kuyper - Siguan Date: 2/1/04

This workshop must be taken annually or as otherwise provided by law.  
P.O. Box 500-409 CK, Saipan, MP 96950  
Tel: (1-670) 664-4370/2394 • Fax: (1-670) 664-4871

Commonwealth of the Northern Mariana Islands  
Department of Health  
Division of Public Health  
Bureau of Environmental Health

**CERTIFICATE OF COMPLETION FOR  
WORKSHOP PARTICIPANTS**

This is to certify that: Wally Kuyper First Last Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on: 2/21/04 Mo Day Yr as part of the Food Handler Certification  
requirements.

Certified by: Wally Kuyper - Siguan Date: 2/1/04

This workshop must be taken annually or as otherwise provided by law.  
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has attended and completed the Food Handler Certification Workshop  
on: 2/21/04 Mo Day Yr as part of the Food Handler Certification  
requirements.

Certified by: Wally Kuyper - Siguan Date: 2/1/04

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**CERTIFICATE OF COMPLETION FOR  
WORKSHOP PARTICIPANTS**

This is to certify that: William A Participant Participant  
has attended and completed the Food Handler Certification Workshop  
on: 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: William A Date: 11/22/04  
This workshop must be taken annually or as otherwise provided by law.  
P.O. Box 500409 CK, Saipan, MP 96950  
Tel: (1-670) 664-4671 Fax: (1-670) 664-4671

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This is to certify that: William A Participant Participant  
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on: 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: William A Date: 11/22/04  
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has attended and completed the Food Handler Certification Workshop  
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requirements.

Certified by: William A Date: 11/22/04  
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requirements.

Certified by: William A Date: 11/22/04  
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**CERTIFICATE OF COMPLETION FOR  
WORKSHOP PARTICIPANTS**

This is to certify that: Amilyn Jack First Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: Willy Kapito Gapanan Date: 7/12/04  
This workshop must be taken annually or as otherwise provided by law.  
P.O. Box 500409 CK, Saipan, MP 96950  
Tel: (1-670) 664-4570/2394 • Fax: (1-670) 664-4571

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**CERTIFICATE OF COMPLETION FOR  
WORKSHOP PARTICIPANTS**

This is to certify that: Joseph A. Naderia First Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: Willy Kapito Gapanan Date: 7/12/04  
This workshop must be taken annually or as otherwise provided by law.  
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**CERTIFICATE OF COMPLETION FOR  
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This is to certify that: Pauline Gapanan First Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: Willy Kapito Gapanan Date: 7/12/04  
This workshop must be taken annually or as otherwise provided by law.  
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This is to certify that: Joseph A. Naderia First Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: Willy Kapito Gapanan Date: 7/12/04  
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**CERTIFICATE OF COMPLETION FOR  
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This is to certify that: Mr. Ben Alfred Alfred  
Last First Middle Initial

has attended and completed the Food Handler Certification Workshop  
on: 11/22/04 as part of the Food Handler Certification  
Mo Day Yr requirements.

Certified by: Willy Kapite Willy Kapite Date: 11/22/04  
Form 00701-00015 This workshop must be taken annually or as otherwise provided by law.  
P.O. Box 500409 CK, Saipan, MP 96950  
Tel: (1-670) 664-4370/213/4 • Fax: (1-670) 664-4371

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**CERTIFICATE OF COMPLETION FOR  
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This is to certify that: Willy Kapite Willy Kapite Willy Kapite  
Last First Middle Initial

has attended and completed the Food Handler Certification Workshop  
on: 11/22/04 as part of the Food Handler Certification  
Mo Day Yr requirements.

Certified by: Willy Kapite Willy Kapite Date: 11/22/04  
Form 00701-00015 This workshop must be taken annually or as otherwise provided by law.  
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Last First Middle Initial

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Mo Day Yr requirements.

Certified by: Willy Kapite Willy Kapite Date: 11/22/04  
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Last First Middle Initial

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Certified by: Willy Kapite Willy Kapite Date: 11/22/04  
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This is to certify that: Yamachi Kay Aulaby Last First Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on: 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: Willy Kapulu Gualak Date: 11/22/04

This workshop must be taken annually or as otherwise provided by law.  
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**CERTIFICATE OF COMPLETION FOR  
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This is to certify that: Willy Kapulu Gualak Last First Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on: 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: Willy Kapulu Gualak Date: 11/22/04

This workshop must be taken annually or as otherwise provided by law.  
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**CERTIFICATE OF COMPLETION FOR  
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This is to certify that: Yulien Pafford Last First Middle Initial  
has attended and completed the Food Handler Certification Workshop  
on: 11/22/04 as part of the Food Handler Certification  
requirements.

Certified by: Willy Kapulu Gualak Date: 11/22/04

This workshop must be taken annually or as otherwise provided by law.  
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Certified by: Willy Kapulu Gualak Date: 11/22/04

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**CERTIFICATE OF COMPLETION FOR  
WORKSHOP PARTICIPANTS**

This is to certify that: Isidoro Benjamin  
Last First Middle Initial

has attended and completed the Food Handler Certification Workshop  
on 1 / 24 / 04 as part of the Food Handler Certification  
Mo Day Yr requirements.

Certified by: Ally Kapito Igasain Date: 1 / 24 / 04

Form DPH-0101-5 This workshop must be taken annually or as otherwise provided by law.  
P.O. Box 500409 CK, Saipan, MP 96950  
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**CERTIFICATE OF COMPLETION FOR  
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This is to certify that: Reggie Bernier  
Last First Middle Initial

has attended and completed the Food Handler Certification Workshop  
on 1 / 24 / 04 as part of the Food Handler Certification  
Mo Day Yr requirements.

Certified by: Ally Kapito Igasain Date: 1 / 24 / 04

Form DPH-0101-5 This workshop must be taken annually or as otherwise provided by law.  
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**CERTIFICATE OF COMPLETION FOR  
WORKSHOP PARTICIPANTS**

This is to certify that: Rose Terigye  
Last First Middle Initial

has attended and completed the Food Handler Certification Workshop  
on 1 / 24 / 04 as part of the Food Handler Certification  
Mo Day Yr requirements.

Certified by: Ally Kapito Igasain Date: 1 / 24 / 04

Form DPH-0101-5 This workshop must be taken annually or as otherwise provided by law.  
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